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TRANSMITTAL FORM		Application Number																																	
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		March 9, 2000																																	
		First Named Inventor																																	
		Henry Li																																	
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Examiner Name		MOORE, Ian N.																																	
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ENCLOSURES (check all that apply)																																			
<table border="1"><tbody><tr><td><input type="checkbox"/> Fee Transmittal Form</td><td><input type="checkbox"/> Drawing(s)</td><td><input type="checkbox"/> After Allowance Communication to TC</td></tr><tr><td><input type="checkbox"/> Fee Attached</td><td><input type="checkbox"/> Licensing-related Papers</td><td><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences</td></tr><tr><td><input checked="" type="checkbox"/> Amendment/Reply and Request for Continued Examination Under 37 CFR 1.114</td><td><input type="checkbox"/> Petition</td><td><input type="checkbox"/> Appeal Communication to TC (<i>Appeal Notice, Brief, Reply Brief</i>)</td></tr><tr><td><input type="checkbox"/> After Final</td><td><input type="checkbox"/> Petition to Convert to a Provisional Application</td><td><input type="checkbox"/> Proprietary Information</td></tr><tr><td><input type="checkbox"/> Affidavits/declaration(s)</td><td><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address</td><td><input type="checkbox"/> Status Letter</td></tr><tr><td><input type="checkbox"/> Extension of Time Request</td><td><input type="checkbox"/> Terminal Disclaimer</td><td><input checked="" type="checkbox"/> Return-Receipt Postcard</td></tr><tr><td><input type="checkbox"/> Express Abandonment Request</td><td><input type="checkbox"/> Request for Refund</td><td><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request For Continued Examination (RCE) Transmittal Form (in duplicate)</td></tr><tr><td><input type="checkbox"/> Information Disclosure Statement</td><td><input type="checkbox"/> CD Number of CD(s) _____</td><td></td></tr><tr><td><input type="checkbox"/> Certified Copy of Priority Document(s)</td><td><input type="checkbox"/> Landscape Table on CD</td><td></td></tr><tr><td><input type="checkbox"/> Reply to Missing Parts/Incomplete Application</td><td rowspan="2">Remarks</td><td></td></tr><tr><td><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53</td><td></td></tr></tbody></table>				<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC	<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences	<input checked="" type="checkbox"/> Amendment/Reply and Request for Continued Examination Under 37 CFR 1.114	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC ( <i>Appeal Notice, Brief, Reply Brief</i> )	<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information	<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter	<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Return-Receipt Postcard	<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request For Continued Examination (RCE) Transmittal Form (in duplicate)	<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD Number of CD(s) _____		<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD		<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	Remarks		<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT																																			
Firm	McAndrews Held & Malloy, Ltd.																																		
Signature																																			
Printed Name	Kevin E. Borg Reg. No. 51,486																																		
Date	October 25, 2006																																		
CERTIFICATE OF MAILING																																			
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on October 25, 2006.																																			
Name (Print/type)	Kevin E. Borg	Registration No. (Attorney/Agent)	51,486																																
Signature		Date	October 25, 2006																																